Stanford program ensures no one dies alone

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Posted: 08/21/2009 10:08:02 PM PDT
Updated: 08/22/2009 05:21:33 AM PDT

Her tiny frame seemed to get lost in the hospital blankets as she lay dying. She was almost 80, couldn't speak, couldn't move, but they still called her "Peter Pan incarnate." She seemed innocent and childlike. Doctors said she could hear and feel touch, so volunteer Heida Earnest stroked her short, thick hair and held her hand.

The machines were disconnected days before, leaving the room sacredly quiet for the cardiology wing. Earnest went through some of the CDs in the black tote bag. Pachelbel. Ocean surf. But she decided against music. She liked the silent company of this woman she had never met.

When Stanford Hospital doctors realized there was nothing more that could be done for the elderly woman, her children on the East Coast realized they wouldn't make it to her bedside in time. It's a concern hospital chaplains have long held: Patients who outlived their relatives, were estranged from their kids, or became ill too far away from family.

"There's something very wrong about dying alone," said the Rev. John Hester, associate director of Spiritual Care at Stanford.

About 600 people die at Stanford every year — 5 percent of them alone in a hospital room. This May, the Spiritual Care service launched a program where volunteers come to the hospital and sit with a stranger in his or her final moments.

"There's a profound sense of connecting with another human being," said Barbara Zahner, a chaplain who helped implement Stanford's No One Dies Alone program, modeled after the flagship program of the same name in Oregon.

"To die in a hospital, it's oftentimes a sterile, cold, clinical context," said George Fitzgerald, director of Spiritual Care. "We want to humanize it."

When Zahner mentioned the program to Earnest, a cataloger for Stanford's medical library, "my eyes got real big," Earnest said. She and her husband had tickets to go see her father at a Florida hospice last year, on a Tuesday. A hospice volunteer called her from her father's room on Sunday. She held the phone up to his ear so Earnest could talk to him. "Hang on, Dad," she said. "We'll be there in two days, hang on." The line went dead. The hospice volunteer called right back. "He just passed," she said to Earnest.

"I feel like they gave me a really precious gift," Earnest said. "I wanted to be able to do this for other people."

Volunteers are called to duty when a patient is actively dying. When nurses and doctors notice a patient's responsiveness diminishing. When hands and feet get colder as the circulation system shuts

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down. When breathing turns erratic — fast, fast, pause, then slow — or when fluid in the lungs and throat causes a snoring sound, the infamous death rattle.

Hester, a Roman Catholic priest, relies on French existentialist philosophers to teach volunteers how to sit with the dying. "To be is to be with," he says, quoting Gabriel Marcel. He tells them to make eye contact with patients, pay attention to the tone, volume and inflection of their voices, and determine if gentle or firm touch is better.

"Unlike the nursing team, there's no to-do list," Zahner said. "It's just simply being present."

Volunteers do two-hour shifts, with up to 15 people witnessing the last 72 hours of the person's life. Staff are talking about having the team compose a letter to families outlining the last days and hours of the person's life.

"We are asked to stand and delegate for the family and it's a very sacred trust that families give us," Hester said. "I would want that we reflect that back to them."

A range of belief systems are represented among the volunteers, from Catholic to Christian Scientist to atheist. But all describe sitting with the dying as deeply profound, an honor and a privilege.

"Probably how nurses feel when they're birthing babies," Earnest said. "Except this is the exit door."

Since May, No One Dies Alone has sent a rotation of volunteers, almost all of them women, to sit with five dying patients. The elderly Peter Pan pixie was the first. Evening fell as Earnest's shift came to an end. When the next volunteer arrived, she stood up and walked to the foot of the bed. She gazed at the sleeping woman, then turned to update her relief.

Hold her hand. Check out that thick hair. We heard she's Jewish, so stick to the Old Testament. They laughed and turned to see if their pixie got the joke. But she wasn't laughing. She wasn't breathing.

With her stream of visitors, kind and gentle, she died in her own moment of solitude.

"Death is a very personal moment," Hester tells volunteers. Sometimes, people want to die alone.

Earnest and the other volunteer stood in shock for a moment. They found the doctor. They said goodbye. Take care. And they prayed.

"It was like a grand symphony," Earnest said. "Everybody plays a part and no part is greater or less than another."

Contact April Dembosky at 408-920-5064.

HOW TO HELP
To volunteer for the No One Dies Alone program, go to stanfordhospital.org/employment/volunteering or call 650-723-7424.